

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32708

FILED
Jun 19, 2008
Secretary of State

Entity Name: THE YACHT CLUB RESIDENCE, A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

100 MACFARLANE DRIVE
DELRAY BEACH, FL 334836804

New Principal Place of Business:

Current Mailing Address:

43 SOUTH POMPANO PARKWAY
273
POMPANO BEACH, FL 33069 US

New Mailing Address:

PO BOX 667348
POMPANO BEACH, FL 33066 US

FEI Number: 65-0269563 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PERSONAL PROPERTY MANAGEMENT, INC.
43 SOUTH POMPANO PARKWAY
273
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

PERSONAL PROPERTY MANAGEMENT, INC.
1500 W CYPRESS CREEK ROAD
419
FORT LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT ANDREWS

06/19/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHAISSON, LLOYD
Address: 100 MACFARLAND AV., UNIT 4D
City-St-Zip: DELRAY BEACH, FL 33483

Title: VPSD () Delete
Name: SARGENT, LARRY
Address: 100 MACFARLAND AC, UNIT 3C
City-St-Zip: DELRAY BEACH, FL 33483

Title: T () Delete
Name: MEISNER, LARRY
Address: 100 MACFARLAND AV, UNIT 4B
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHAISSON, LLOYD
Address: 100 MACFARLAND DR., UNIT 4D
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP (X) Change () Addition
Name: SARGENT, LARRY
Address: 100 MACFARLAND DR, UNIT 3C
City-St-Zip: DELRAY BEACH, FL 33483

Title: ST (X) Change () Addition
Name: MATTHEWS, MITLON
Address: 100 MACFARLAND DR
City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LLOYD CHAISSON

PD

06/19/2008

Electronic Signature of Signing Officer or Director

Date